



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

US EPA RECORDS CENTER REGION 5



428694

FEB 23 2012

REPLY TO THE ATTENTION OF
SE-5J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Barbara R. Snyder, President
Case Western Reserve University
10900 Euclid Avenue
Cleveland, OH 44106-7001

Re: Request for Information Pursuant to Section 104 of CERCLA for the Texas Township Drum Site in Kalamazoo, Kalamazoo County, Michigan; Site Spill Identification Number: B5PY

Dear President Snyder:

This letter seeks your cooperation in providing information and documents relating to the contamination of the Texas Township Drum Superfund Site in Kalamazoo, Michigan (Site). A Superfund site is a site contaminated with high levels of hazardous substances that may present a threat to human health or the environment.

We encourage you to give this matter your immediate attention and request that you provide a complete and truthful response to this Information Request and enclosed questions (Enclosure B) within twenty-one (21) calendar days of your receipt of this letter.

The United States Environmental Protection Agency conducted a time-critical removal action at the Site. EPA is seeking to obtain information concerning the generation, storage, treatment, transportation and methods used to dispose of such substances that were released or had the potential to be released from the Site. In addition, EPA is investigating activities, materials and parties that contributed to contamination at the Site. EPA believes that you might have information that may assist the Agency in its investigation of the Site.

On August 19, 2008, a fire occurred in a pole-barn located on the Site property and on August 26, 2008, local, county, and state authorities entered the Site to conduct an assessment of the conditions. During the assessment, approximately 500 drums of various hazardous materials and biological wastes were discovered within the pole-barn, staged along a clearing, and placed in a recently excavated pit on the property. On August 27, 2008, the United States Environmental Protection Agency and the Michigan Department of Environmental Quality (MDEQ) began an investigation of conditions at the Site and determined that an emergency removal action was required.

EPA conducted a removal action at the Site from August 26, 2008, through July 8, 2009. During that time, drums of wastes were staged, sampled, and characterized. EPA determined that many of the drums held smaller containers of waste haphazardly filled with chemicals found in commercial, medical, academic and research laboratories. Twenty-five of the drums contained radioactive material and the remainder contained other various hazardous materials and biological wastes, including about 36,000 pounds of mercury, 20,500 pounds of chromium and arsenic, and 8,025 pounds of formalin, which is a form of formaldehyde. Drums and containers were over-packed and shipped to off-site locations for disposal. The pole-barn was demolished and its concrete foundation was removed and disposed of at an off-site location. In addition, soil from three affected areas was removed for treatment and disposal. Documents found in one or more of the drums indicate that Case Western University may have been one of the generators of some of the hazardous substances disposed of at the Site.

Description of Legal Authority

The federal "Superfund" law (the Comprehensive Environmental Response, Compensation, and Liability Act of 1980, as amended, 42 U.S.C. § 9601 *et seq.*, commonly referred to as "CERCLA" and "Superfund") gives EPA the authority to, among other things: (1) assess contaminated sites, (2) determine the threats to human health and the environment posed by each site and (3) clean up those sites in the order of the relative threats posed by each.

Information Request

Under Section 104(e)(2) of CERCLA, 42 U.S.C. § 9604(e)(2), EPA has broad information gathering authority which allows EPA to require persons to furnish information or documents relating to:

- (A) The identification, nature and quantity of materials which have been or are generated, treated, stored or disposed of at a vessel or facility or transported to a vessel or facility.
- (B) The nature or extent of a release or threatened release of a hazardous substance or pollutant or contaminant at or from a vessel or facility.
- (C) Information relating to the ability of a person to pay for or to perform a cleanup.

While EPA seeks your cooperation in this investigation, compliance with the Information Request is required by law. Please note that false, fictitious or fraudulent statements or representations may subject you to civil or criminal penalties under federal law.

Some of the information EPA is requesting may be considered by you to be confidential. Please be aware that you may not withhold the information upon that basis. If you wish EPA to treat the information confidentially, you must advise EPA of that fact by following the procedures outlined in Enclosure A, including the requirement for supporting your claim for confidentiality.

If you have information about other parties who may have information which may assist the Agency in its investigation of the Site or may be responsible for the contamination at the Site, that information should be submitted within the time frame noted above.

This Information Request is not subject to the approval requirements of the Paperwork Reduction Act of 1995, 44 U.S.C. § 3501 *et seq.*

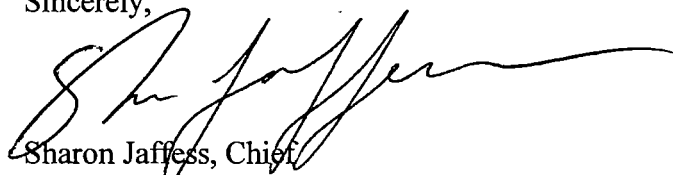
Instructions on how to respond to the questions in Enclosure B to this document are described in Enclosure A. Your response to this Information Request should be mailed to:

Carol Ropski
U.S. Environmental Protection Agency
Enforcement Services Section 1, SE-5J
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

If you have additional questions about the history of the Site, the nature of the environmental conditions at the Site or the status of cleanup activities, please contact Associate Regional Counsel, Steven Kaiser at 312-353-3804. However, if you have specific questions about the Information Request, please contact Carol Ropski at 312-353-7647.

We appreciate and look forward to your prompt response to this Information Request.

Sincerely,



Sharon Jaffess, Chief
Enforcement and Compliance Assurance Branch

Enclosures

Enclosure A
Information Request
to Case Western Reserve University

Instructions

1. Answer Every Question Completely. A separate response must be made to each of the questions set forth in this Information Request. For each question contained in this letter, if information responsive to this Information Request is not in your possession, custody or control, please identify the person(s) from whom such information may be obtained.
2. Number Each Answer. Precede each answer with the corresponding number of the question and the subpart to which it responds.
3. Provide the Best Information Available. Provide responses to the best of Respondent's ability, even if the information sought was never put down in writing or if the written documents are no longer available. You should seek out responsive information from current and former employees/agents. Submission of cursory responses when other responsive information is available to the Respondent will be considered non-compliance with this Information Request.
4. Identify Sources of Answer. For each question, identify (see Definitions) all the persons and documents that you relied on in producing your answer.
5. Continuing Obligation to Provide/Correct Information. If additional information or documents responsive to this Request become known or available to you after you respond to this Request, EPA hereby requests pursuant to Section 104(e) of CERCLA that you supplement your response to EPA.
6. Confidential Information. The information requested herein must be provided even though you may contend that it includes confidential information or trade secrets. You may assert a confidentiality claim covering part or all of the information requested, pursuant to Sections 104(e)(7)(E) and (F) of CERCLA, 42 U.S.C. §§ 9604(e)(7)(E) and (F), and Section 3007(b) of the Resource Conservation and Recovery Act (RCRA), 42 U.S.C. § 6927(b), and 40 C.F.R. § 2.203(b).

If you make a claim of confidentiality for any of the information you submit to EPA, you must prove that claim. For each document or response you claim confidential, you must separately address the following points:

- a) the portions of the information alleged to be entitled to confidential treatment;
- b) the period of time for which confidential treatment is desired (e.g., until a certain date, until the occurrence of a specific event or permanently);

- c) measures taken by you to guard against the undesired disclosure of the information to others;
- d) the extent to which the information has been disclosed to others and the precautions taken in connection therewith;
- e) pertinent confidentiality determinations, if any, by EPA or other federal agencies, and a copy of any such determinations or reference to them, if available; and
- f) whether you assert that disclosure of the information would likely result in substantial harmful effects on your business' competitive position, and if so, what those harmful effects would be, why they should be viewed as substantial and an explanation of the causal relationship between disclosure and such harmful effects.

To make a confidentiality claim, please stamp or type "confidential" on all confidential responses and any related confidential documents. Confidential portions of otherwise non-confidential documents should be clearly identified. You should indicate a date, if any, after which the information need no longer be treated as confidential. Please submit your response so that all non-confidential information, including any redacted versions of documents, is in one envelope and all materials for which you desire confidential treatment are in another envelope.

All confidentiality claims are subject to EPA's verification. It is important that you satisfactorily show that you have taken reasonable measures to protect the confidentiality of the information and that you intend to continue to do so, and that it is not and has not been obtainable by legitimate means without your consent. Information covered by such claim will be disclosed by EPA only to the extent permitted by Section 104(e) of CERCLA. If no such claim accompanies the information when it is received by EPA, then it may be made available to the public by EPA without further notice to you.

7. Disclosure to EPA Contractor. Information which you submit in response to this Information Request may be disclosed by EPA to authorized representatives of the United States, pursuant to 40 C.F.R. § 2.310(h), even if you assert that all or part of it is confidential business information. Please be advised that EPA may disclose all responses to this Information Request to one or more of its private contractors for the purpose of organizing and/or analyzing the information contained in the responses to this Information Request. If you are submitting information which you assert is entitled to treatment as confidential business information, you may comment on this intended disclosure within fourteen (14) calendar days of receiving this Information Request.

8. Personal Privacy Information. Personnel and medical files, and similar files, the disclosure of which to the general public may constitute an invasion of privacy, should be segregated from your responses, included on separate sheet(s) and marked as "Personal Privacy Information."

9. Objections to Questions. If you have objections to some or all the questions within the Information Request letter, you are still required to respond to each of the questions.

Definitions

The following definitions shall apply to the following words as they appear in this Information Request.

1. The term "**arrangement**" means every separate contract or other agreement between two or more persons, whether written or oral.
2. The term "**documents**" includes any written, recorded, computer-generated or visually or aurally reproduced material of any kind in any medium in your possession, custody or control, or known by you to exist, including originals, all prior drafts, and all non-identical copies.
3. The term "**hazardous substance**" shall have the same definition as that contained in Section 101(14) of CERCLA, and includes any mixtures of such hazardous substances with any other substances, including mixtures of hazardous substances with petroleum products or other nonhazardous substances.
4. The term "**identify**" means, with respect to a natural person, to set forth: (a) the person's full name; (b) present or last known business and home addresses and telephone numbers; (c) present or last known employer (include full name and address) with title, position or business.
5. With respect to a corporation, partnership or other business entity (including a sole proprietorship), the term "**identify**" means to provide its full name, address and affiliation with the individual and/or company to whom/which this request is addressed.
6. The term "**material**" or "**materials**" shall mean any and all objects, goods, substances or matter of any kind, including but not limited to wastes.
7. The term "**person**" shall include any individual, firm, unincorporated association, partnership, corporation, trust or other entity.
8. The term "**pollutant or contaminant**" shall include, but not be limited to, any element, substance, compound or mixture, including disease-causing agents, which after release into the environment will or may reasonably be anticipated to cause death, disease, behavioral abnormalities, cancer, genetic mutation, physiological malfunctions (including malfunctions in reproduction) or physical deformations; except that the term "pollutant or contaminant" shall not include petroleum.
9. The term "**real estate**" shall mean and include, but not be limited to the following: land, buildings, a house, dwelling place, condominium, cooperative apartment, office or commercial building, including those located outside the United States.

10. The term "**release**" shall mean any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment, including the abandonment or discharging of barrels, containers and other closed receptacles containing any hazardous substance or pollutant or contaminant.

11. The term "**Site**" shall mean the **Texas Township Drum** Superfund Site located at 10135 West O Avenue, Kalamazoo, Kalamazoo County, Michigan.

12. The term "**waste**" or "**wastes**" shall mean and include trash, garbage, refuse, by-products, solid waste, hazardous waste, hazardous substances and pollutants or contaminants, whether solid, liquid or sludge, including but not limited to containers for temporary or permanent holding of such wastes.

13. The term "**you**" or "**Respondent**" shall mean Case Western Reserve University.

Enclosure B
Requests

1. Identify all persons consulted in the preparation of the answers to these Information Requests.
2. Identify all documents consulted, examined or referred to in the preparation of the answers to these Requests, and provide copies of all such documents.
3. If you have reason to believe that there may be persons able to provide a more detailed or complete response to any Information Request or who may be able to provide additional responsive documents, identify such persons.
4. List the EPA Identification Numbers of the Respondent.
5. Identify all persons having knowledge or information about your generation, transportation, treatment, disposal or other handling of hazardous substances.
6. Did you ever dispose, transport or otherwise handle any hazardous substances or materials in a laboratory setting? If the answer to the preceding question is anything but an unqualified "no", identify:
 - a) The chemical composition, characteristics, physical state (e.g., solid, liquid) of each hazardous substance disposed, transported or otherwise handled by the laboratory or by any other location at the University;
 - b) Who supplied you with such hazardous substances;
 - c) How such hazardous substances were stored, treated, transported, disposed or otherwise handled by you;
 - d) When such hazardous substances were stored, treated, transported, disposed or otherwise handled by you;
 - e) Where such hazardous substances were stored, treated, transported, disposed or otherwise handled by you; and
 - f) The quantity of such hazardous substances stored, treated, transported, disposed or otherwise handled by you.
7. Identify all persons, including you, who may have arranged for disposal or treatment or arranged for transportation for disposal or treatment of waste materials, including hazardous substances, at the Site or to the Site and provide copies of any contracts for transportation,

disposal, or treatment of waste materials, including hazardous wastes between 1990 and 2008. In addition, identify the following:

- a) The persons or entities with whom you or such other persons made such arrangements, including, but not limited to The Environmental Quality Company and Amersham;
- b) The contact information for each person or entity with whom such arrangements were made;
- c) Every date on which such arrangements took place;
- d) For each transaction, the nature of the waste material or hazardous substance, including the chemical content, characteristics, physical state (e.g., solid, liquid) and the process for which the substance was used or the process which generated the substance;
- e) The owner of the waste materials or hazardous substances so accepted or transported;
- f) The quantity of the waste materials or hazardous substances involved (weight or volume) in each transaction and the total quantity for all transactions;
- g) All tests, analyses and analytical results concerning the waste materials;
- h) The person(s) who selected the Site as the place to which the waste materials or hazardous substances were to be transported;
- i) The amount paid in connection with each transaction, the method of payment and the identity of the person from whom payment was received;
- j) Where the person identified in g. above intended to have such hazardous substances or waste materials transported and all evidence of this intent;
- k) Whether the waste materials or hazardous substances involved in each transaction were transshipped through, or were stored or held at, any intermediate site prior to final treatment or disposal;
- l) What was actually done to the waste materials or hazardous substances once they were brought to the Site;
- m) The final disposition of each of the waste materials or hazardous substances involved in such transactions;
- n) The measures taken by you to determine the actual methods, means and site of treatment or disposal of the waste material and hazardous substances involved in each transaction;

o) The type and number of containers in which the waste materials or hazardous substances were contained when they were accepted for transport, and subsequently until they were deposited at the Site, and all markings on such containers;

p) The price paid for (i) transport or (ii) disposal of (iii) or both, of each waste material and hazardous substance;

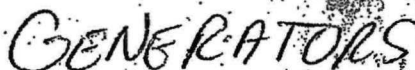
q) All documents containing information responsive to a)-o) above, or in lieu of identification of all relevant documents, provide copies of all such documents; and

r) All persons with knowledge, information or documents responsive to questions a through q, above.

8. With respect to the documents found in Enclosure C, please confirm that these contain true and accurate copies of Case Western Reserve University Purchase Requisition Forms.

Enclosure C

Case Western University Documents



FAX: 734-547-2501

Total Quantity

This Lab Pack List continues: Yes ☐ No ☒ This is page

GOLF FACILITY

TRANSELCO

OFFER

CASH, WESLEY R.
 Chemical Engineer
 A. W. Smith
 Cleveland, Ohio, U.S.A.

DATE ENTERED	CUSTOMER'S ORDER NO.	QUANTITY ORDERED	UNIT PRICE	TOTAL PRICE	DESCRIPTION	AMOUNT PAID
4/6/88	SAMPLE	2	10.00	20.00	NO CHARGE	

NO CHARGE

White-Original / Green-Production / Canary-Packing Unit / Ink-Salvaging / Gold-Office Unit 19027-1/4


Duplicate

1 Copy for Laddie



CASE WESTERN RESERVE UNIVERSITY
PURCHASE REQUISITION

SHADED AREA: PURCHASING ONLY

PG. TYPE 		CASE REPORT RECEIVED UNIVERSITY PURCHASE REQUISITION SHARED AREA PURCHASING ONLY				DATE 02/26/92	REQUISITION NUMBER G002146
DELIVER TO PERSON -MARTIN		BUILDING MED	LOCATION CODE 4970	ROOM NO. E561	PHONE EXT. 5520	SHIP TO ARRIVE (if needed) 02/28/92	
RETURN BLUE COPY OF P.O. TO PERSON RUTH WASHINGTON		BUILDING MED	LOCATION CODE 4970	ROOM NO. E535	PHONE EXT. 6163		
ACCOUNT NUMBER 642-3120-9179		ACCOUNT NAME CORE C				DEPARTMENT PHYSIOLOGY	
ACCOUNT EXPIRATION DATE		SHIP VIA	DIRECT	PICK UP	SPECIAL	F.O.B.	P.O. NUMBER
SUGGESTED VENDOR: N. RADIOCHEMICALS				SELECTED VENDOR:			
COMPANY NAME: PO BOX 19534				COMPANY NAME:			
COMPLETE ADDRESS: IRVINE, CA 92713				COMPLETE ADDRESS:			
CITY, STATE & ZIP 800-854-0539, H. SCHUURDEBEK				CITY, STATE & ZIP			
PHONE				FAX			
PHONE				FAX			

[illegible]

CHARGE APPROVAL-UNIV. BUDGET	DATE	REQUISITION APPROVAL-DEPARTMENT	DATE
CHARGE APPROVAL-UNIV. APPROVAL AUTHORITY	DATE	REQUISITION APPROVAL-MANAGEMENT CENTER	DATE
DEPARTMENT MANAGER APPROVAL	DATE	DEAN OR DEPARTMENT HEAD	DATE

SHADED AREA - PURCHASING ONLY			
<u>P.O. TERMS</u>		<u>P.O. CHECK</u>	
<input type="checkbox"/> WRTU TETING <input type="checkbox"/> OTHER _____ <input type="checkbox"/> DEPOSIT \$ _____		<input type="checkbox"/> LEAVE BLANK <input type="checkbox"/> FILL IN AMOUNT \$ _____ <input type="checkbox"/> MAIL <input type="checkbox"/> DO NOT MAIL <input type="checkbox"/> FAX	
<u>FRIGHTS CONFIRMED BY:</u>			
<input type="checkbox"/> QUOTATION <input type="checkbox"/> MAIL <input type="checkbox"/> HRP <input type="checkbox"/> CONTRACT <input type="checkbox"/> PHONE <input type="checkbox"/> FAX			
<input type="checkbox"/> REP. <input type="checkbox"/> PHONE <input type="checkbox"/> MAIL <input type="checkbox"/> FAX		CONFIRMED TO _____ DATE ORDER PLACED _____ PLACED BY _____	
RENTS/SPECIAL INSTRUCTIONS:			
_____ _____ _____			
F - PURCHASING		CANARY - DEPARTMENT HEAD	
		PINK - DEPARTMENT REQUESTER	
		SFF REVERSE CUTS CAN ALSO BE USED	

G 002146

CASE WESTERN RESERVE UNIVERSITY

PURCHASE REQUISITION

DIRECT	PICK UP	AIR MAIL	BUYER	DELIVER TO: PERSON LOCATION BLDG. ROOM NO. & EXTENSION	REQUISITION DATE	SHIP TO ARRIVE
				Dr. John Schreiber RRC Bldg 1X-3237	1-24-92 10	2-7-92
IF IT IS MANADATORY TO USE SUGGESTED VENDOR, PLEASE CHECK HERE →				CONFIRMING	ACCOUNT NUMBER	REQUISITION NO.
X				MANAGEMENT CENTER	642-3120-3623	T 89578
				DEPARTMENT	ACCOUNT NAME	
				Medicine Infectious Diseases	Aeruginosa	

PLEASE STATE ADEQUATE GENERAL SPECIFICATIONS TO FACILITATE BUYING

ITEM NO.	QUANTITY AND UNIT	DESCRIPTION	ESTIMATED		SUGGESTED VENDOR
			UNIT PRICE	AMOUNT	
1	250uCi	S ³⁵ ATP (250uCi) cat# = SJ 1304	4.00	4.00	Amersham
APPROVED BY: <i>[Signature]</i> DATE: 1/30/92					
RADIATION SAFETY OFFICER FOR PURCHASE UNDER CWRU NRC LICENSE #34-00738-04					
RECEIVED					
JAN 28 1992					
PEDIATRIC ACCOUNTING					
RECEIVED					
JAN 30 1992					
RADIATION SAFETY					
RETURN BLUE COPY OF P.O. TO:			BLDG	ROOM NO.	TOTAL
Kathy Gensur			290	B 46	60
PURCHASE APPROVAL - UNIVERSITY BUDGET			REQUISITION APPROVAL - DEPARTMENT		
PURCHASE APPROVAL - UNIVERSITY APPROVAL AUTHORITY			REQUISITION APPROVAL - MANAGEMENT CENTER		
EQUIPMENT/MANAGER APPROVAL			DATE	DEAN OR DEPARTMENT HEAD	DATE
Suplb				INITIALS <i>[Signature]</i>	
				DATE 1/29/92	

1) ORIGINAL - TO PURCHASING

ENT'D HELIX

JUL-11-91 THU 8:45 CWRU PURCHASING
CASE WESTERN RESERVE UNIVERSITY

PURCHASING REQUISITION 6-28-91

DIRECT	PICK UP	AIR MAIL	BUYER	DEIVER TO: PERSON LOCATION BLDG ROOM NO & EXTENSION?	ACCOUNT NUMBER	ACCOUNT NAME
			John Schreiber	RB&C Rm 591 X-3237	642-3120-3474	T 8950
IF IT IS MANDATORY TO USE SUGGESTED VENDOR, PLEASE CHECK HERE			CONFIRMING	MANAGEMENT CENTER	DEPARTMENT	ACCOUNT NAME
<input checked="" type="checkbox"/>			<input type="checkbox"/>	Medicine	Infectious Diseases	Thrasher

PLEASE STATE ADEQUATE GENERAL SPECIFICATIONS TO FACILITATE BUYING

ITEM NO.	QUANTITY AND UNIT	DESCRIPTION	ESTIMATED		SUGGESTED VENDOR
			UNIT PRICE	AMOUNT	
1	1x10mCi	IMS-300 Iodine (¹²⁵ I) (radioactive) cat # = IMS-300 material	\$230.00	\$230.00	Amersham
<div>Send to Rm. 305 Pathology Building (Dr. Neil Greenspan)</div> <div>Authorized User = Dr. Neil Greenspan</div> <div>RUSH RECEIVED JUL 5 1991</div> <div>PEDIATRIC ACCOUNTING</div>					

RETURN BLUE COPY OF P.O. TO:

KATHY GENSUR, TRIANGLE 290D

PURCHASE APPROVAL - UNIVERSITY BUDGET

PURCHASE APPROVAL - UNIVERSITY APPROVAL AUTHORITY

PURCHASING

EQUIPMENT MANAGER APPROVAL

REQUISITION APPROVAL DEPARTMENT
REQUISITION APPROVAL MANAGEMENT CENTER

DEAN OR DEPARTMENT HEAD

DATE

10 JUL 4 3 51

RUSH

1) ORIGINAL - TO PURCHASING

SEP-16-91 MON 8:33 CWRU PURCHASING
CASE WESTERN RESERVE UNIVERSITY

PURCHASE REQUISITION

Sept 8, 1991

DIRECT	PICK UP	AIR MAIL	BUYER	DELIVER TO, PERSON, LOCATION, BLDG. ROOM NO. & EXTENSION	ACCOUNT NUMBER
				John Schreiber RB2C Rm 591 X-323	642-3120-3911
IF IT IS MANDATORY TO USE SUGGESTED VENDOR, PLEASE CHECK HERE →			CONFIRMING	MANAGEMENT CENTER	DEPARTMENT
			<input checked="" type="checkbox"/>	MEDICINE	Infectious Diseases
					Thrasher

PLEASE STATE ADEQUATE GENERAL SPECIFICATIONS TO FACILITATE BUYING

ITEM NO.	QUANTITY AND UNIT	DESCRIPTION	ESTIMATED		SUGGESTED VENDOR
			UNIT PRICE	AMOUNT	
1	5mCi	IMS-30 Iodine (¹²⁵ I)	63.00	63.00	Amersham
<div>Send to Rm 305 Pathology Building Dr. Neil Greenspan APPROVED BY: <i>Inez A. Baker for</i> RADIATION SAFETY OFFICER FOR C.W.R.U. Dr. Neil Greenspan</div>			RECEIVED		
			SEP 16 1991		
			RADIATION SAFETY		
			RECEIVED		
			SEP 10 1991		
			PEDIATRIC ACCOUNTING		

RETURN BLUE COPY OF P.O. TO

K. Gensue

PURCHASE APPROVAL - UNIVERSITY BUDGET

PURCHASE APPROVAL - UNIVERSITY APPROVAL AUTHORITY

PURCHASING

EQUIPMENT MANAGER APPROVAL

BLOG

ROOM NO.

TOTAL

Trinnale 290063.00

REQUISITION APPROVAL - DEPARTMENT

REQUISITION APPROVAL - MANAGEMENT CENTER

DEAN OR DEPARTMENT HEAD

DATE

13 SEP 91 4:38

1) ORIGINAL - TO PURCHASING

GUIDELINES FOR CHEMICAL DISPOSAL

All chemicals, except those identified in Section II of CASE WESTERN RESERVE UNIVERSITY'S HAZARDOUS CHEMICAL WASTE PROCEDURES, must be disposed of through the University's Hazardous Waste Program and are not permitted to be disposed of into the sanitary sewer system.

COMBINING CHEMICALS

When combining chemicals, please adhere to the following:

1. Organic liquids, either aliphatic or aromatic (but not both together), if compatible, may be combined. These combinations are limited to alcohols, ketones and acids. Conjugated materials should not be in these mixtures.
2. All chlorinated or halogenated solvents should be combined separately from alcohols and ketones.
3. All reactives, such as mercaptans, amines and inorganics should be in a non-combined state. However, chemicals of the same composition can be combined in a single bottle to make a cost effective disposal. For example, if a 500 ml bottle of ethylmercaptan contains 250 mls residual, another partial bottle of the same composition may be added to it. The cost of disposal would be limited to the singular bottle. Triple rinse the empty container and throw away. This is also applicable to all organic and inorganic substances for general combination. Cost effective container sizes are one (1) gallon or five (5) gallons. For example, a 1-1/2 gallon container would cost the same as a 5 gallon container.
4. If you have any doubt about combining chemicals in the same container, consult Table I in the CWRU "Chemical Disposal Procedures" document. To randomly pour waste, even though labeled properly into a container without exploring the reactive nature of the ingredients, is extremely dangerous! CONSULT YOUR DEPARTMENT CHAIR FOR INFORMATION, OR CALL THE OFFICE OF SAFETY SERVICES.
5. Class A explosives, such as perchloric acid and picric acid, should not be left on the shelf to crystallize and dehydrate. Containers of these materials that have been dehydrated should be handled with extreme caution and water should be added to the material before committing to disposal. Failure to do this could result in injury to laboratory workers and personnel having to move the materials.
6. If there are any questions, please call the Office of Safety Services at 368-2907.

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- 5) Class A explosives, such as perchloric acid and picric acid, should not be left on the shelf to crystalize and dehydrate. Containers of these materials that have been dehydrated should be handled with extreme caution and water should be added to the material before committing to disposal. Failure to do this could result in injury to laboratory workers and personnel having to move the materials.
- 6) If there are any questions, please call the Office of Safety Services at 368-2907.



HAZARDOUS WASTE AND UNWANTED CHEMICAL DISPOSAL LISTING

Location _____
Department _____
Phone _____
Date _____

Contact _____
Primary Investigator _____
Account Number _____
Sequence Number _____

INSTRUCTIONS: A) Complete the form with the description of waste, i.e., written generic chemical name and percentage of each ingredient or a chemical formula if known. Number each container. Label each container with the phrase "HAZARDOUS WASTE". B) Separate waste containers for disposal from other other chemicals. C) DO NOT PACK WASTE CONTAINERS INTO BOXES; Safety Services will pack into shipping boxes. D) Send completed form back to safety services (213 Quail Building) for approvals and date of pick-up.

Ref.	EPA (Office use only)	W.C.	Bottle #	Description- Chem. name and percentages	Quantity (Kg or g)

Safety Services-Waste Disposal

I certify that: 1) the above information to be true and correct. 2) Radionuclides were not involved with the process



FACSIMILE MESSAGE

FROM FAX # (216) 368-2236

TO: Dr. C. Cotton

COMPANY/DEPT: _____

FROM: Chris Bid-Safar

FAX NO: 19-8916

DATE: 3-47-92

TOTAL NO. OF PAGES
(including cover page): 3

MESSAGE: _____

Sorry. It took so
long
Gordie

2 15:50

216 368 2236

RADIATION SAFETY

001

*** ACTIVITY REPORT ***

TRANSMISSION OK

TX/RX NO.

6759

CONNECTION TEL

98445916

CONNECTION ID

START TIME

03/17 15:49

USAGE TIME

00'52

PAGES

1

RESULT

OK



FACSIMILE MESSAGE

FROM FAX # (216) 368-2236

TO:

Tom

COMPANY/DEPT:

FROM:

Gordie Polanco

Rad Safety

FAX NO:

4481

DATE:

4 / 9 / 92

TOTAL NO. OF PAGES
(including cover page):

2

MESSAGE:

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DECOMMISSION OF LABORATORY

I have resigned from my position at CWRU effective 10/31/91.

I have completed the list of items required to allow decommission of my radiation laboratory at UCRC #2, Suite 200, Lab #3.

All equipment in the laboratory has been wipe tested and probed for removable and non-removable contamination. No items are contaminated.

All laboratory areas have been wipe tested and probed and all are clean.

In the future, the laboratory (Lab #3) will be monitored and used by Dr. Robert Pelley, the authorized user in UCRC #2, Suite 200, Lab #2 and Dr. Sanford Markowitz, the authorized user in Lab #1.

The tissue culture room #203 which was previously under my name for surveillance will be transferred to Dr. Sanford Markowitz, the authorized user in UCRC #2, Suite 200, Lab #1. This area has been wipe tested and probed and is clean.

The low level waste wooden cabinets in the common equipment area which were previously under my name for surveillance will be transferred to Dr. David Sedwick, Lab #6.

All ^{32}P solid wastes from my laboratory has been transferred to the containment room in the basement of UCRC #2 for decay and disposal by Dr. Robert Pelley.

The 4.7 mCi of ^3H (uridine) has been transferred to Dr. Jack Hensold, the authorized user in UCRC #2, Suite 200, Lab #4. See the internal transfer form.

The 125 μCi of ^{35}S -dATP has been transferred to Dr. Robert Pelley in Lab #2 for decay.

cc: Dr. Sanford Markowitz
Dr. Robert Pelley
Dr. Jack Hensold
Dr. Martina Veigl
Dr. David Sedwick

RECEIVED
OCT 28 1991
RADIATION SAFETY

CASE WESTERN RESERVE UNIVERSITY
RESPIRATOR FIT TEST RECORD
DEPARTMENT OF OCCUPATIONAL & ENVIRONMENTAL SAFETY
OFFICE OF SAFETY SERVICES

Name: Tommy Goldstein

Date: _____

Building: Quail

Room: 214

Department: _____

Respirator Type: Full Face ☒ Half Mask ☐

MFG/Model MSA Ultra Twin

NIOSH Approval # 24

Respirator Fit Conditions:

- | | | |
|---|---|--|
| <input type="checkbox"/> Clean Shaven | <input type="checkbox"/> Beard Growth(1-2 days) | <input type="checkbox"/> Beard Growth(2+ days) |
| <input type="checkbox"/> Moustache | <input type="checkbox"/> Facial Scar(s) | <input type="checkbox"/> Dentures in/ not in |
| <input checked="" type="checkbox"/> Wears Glasses | <input type="checkbox"/> Other Problems | <input type="checkbox"/> No Problems |

Comments: _____

Fit Checks

Negative Pressure ☒ Pass ☐ Fail

Positive Pressure ☒ Pass ☐ Fail

FIT TESTING: ☐ Quantitative ☒ Fit Factor ☐ Qualitative

Testing Agent: ☐ Isoamyl acetate ☒ Irritant Smoke

☒ Fail

Comments: No Strong Smell. Needs Strong Rise To
React To Smoke. Sore Throat Reported & Leakage May
Have Occurred. Recommend PortaCount procedure

Employee acknowledgement of test results:

Signature: T. Goldstein

Date: 3/31/92

Tested By: [Signature]

Date: 3/31/92



CASE WESTERN RESERVE UNIVERSITY

Date 2-13-91

MEMORANDUM

TO: Warren Malchman, Safety Services

FROM: Eleanor W. Davidson, M.D. *E Davidson MD*

Tammy Goldstein has completed a respirator questionnaire and been examined at UHS. I find this individual:

☐ able to wear a respirator without restrictions

☒ able to wear a respirator with the following restrictions

LIGHT- MOD WORK ONLY

☐ unsuitable for using a respirator under usual working conditions

copy to: Medical File

c:\davidson\wmresp.mem

University Health Service

MAILING ADDRESS
Case Western Reserve University
10900 Euclid Avenue
Cleveland, Ohio 44106-4901

VISITORS AND DELIVERIES
2145 Adelbert Road

Phone 216-368-2450
Fax 216-368-8530

UNIVERSITY
RESPIRATOR FIT TEST RECORD
OCCUPATIONAL & ENVIRONMENTAL SAFETY
SERVICES

Date: 3/31/92

Room: 219

Department: DOES

Respirator Type: ☒ Full Face ☐ Half Mask

Model: M5A Ultra Twin

NIOSH Approval #: TC-23C-153

Respirator Fit Conditions:

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Clean Shaven | <input type="checkbox"/> Beard Growth(1-2 days) | <input type="checkbox"/> Beard Growth(2+ days) |
| <input checked="" type="checkbox"/> Moustache | <input type="checkbox"/> Facial Scar(s) | <input type="checkbox"/> Dentures in/ not in |
| <input type="checkbox"/> Wears Glasses | <input type="checkbox"/> Other Problems | <input type="checkbox"/> No Problems |

Comments: _____

Fit Checks

Negative Pressure ☒ Pass ☐ Fail

Positive Pressure ☒ Pass ☐ Fail

FIT TESTING: ☐ Quantitative ☒ 10 Fit Factor ☐ Qualitative

Testing Agent: ☐ Isoamyl acetate ☒ Irritant Smoke

☒ Pass ☐ Fail

Comments: _____

Employee acknowledgement of test results:

Signature: Karl Von Ahn

Date: 3-31-92

Tested By: [Signature]

Date: 3/31/92

WESTERN RESERVE UNIVERSITY

Date 11-19-91

MEMORANDUM

TO: Warren Malchman, Safety Services

FROM: Eleanor W. Davidson, M.D. *END*

Karl Von Ahn has completed a respirator questionnaire and been examined at UHS. I find this individual:

☒ able to wear a respirator without restrictions

☐ able to wear a respirator with the following restrictions

☐ unsuitable for using a respirator under usual working conditions

✓ copy to: Medical File
done

c:\davidson\wmresp.mem

University Health Service

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10900 Euclid Avenue
Cleveland, Ohio 44106-4901

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